Your 2014–2015 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

A. Independent Student’s Information

<table>
<thead>
<tr>
<th>Student’s Last Name</th>
<th>Student’s First Name</th>
<th>Student’s M.I.</th>
<th>Student’s Social Security Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Student’s Street Address (include apt. no.)</th>
<th>Student’s Banner ID Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Student’s Date of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Student’s Home Phone Number (include area code) or Cell Phone Number</th>
<th>Student’s Email Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

B. Independent Student’s Family Information

List the people in your household. Include:

- Yourself;
- Your spouse, if you are married;
- Your children, if any, if you will provide more than half of their support from July 1, 2014, through June 30, 2015, or if the child would be required to provide your information if they were completing a FAFSA for 2014–2015. Include children who meet either of these standards, even if they do not live with you;
- Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2015.

Include the name of the college for any household member who will be enrolled at least half time (6 credits or more), in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2014, and June 30, 2015. If more space is needed, attach a separate page with your name and Social Security Number at the top.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Age</th>
<th>Relationship</th>
<th>College</th>
<th>Will be Enrolled at Least Half Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marty Jones(example)</td>
<td>28</td>
<td>Wife</td>
<td>Central University</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Self</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
C. Independent Student’s Other Information to Be Verified

1. Complete this section if someone in the student’s household (listed in Section B) received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as food stamps) any time during the 2012 or 2013 calendar years.

☐ One of the persons listed in Section B of this worksheet received SNAP benefits in 2012 or 2013. If asked by my school, I will provide documentation of the receipt of SNAP benefits during 2012 and/or 2013.

2. Complete this section if you or your spouse, if married, paid child support in 2013.

☐ Either I, or if married, my spouse who is listed in Section B of this worksheet, paid child support in 2013. I have indicated below the name of the person who paid the child support, the name of the person to whom the child support was paid, the names of the children for whom child support was paid, and the total annual amount of child support that was paid in 2013 for each child. If asked by my school, I will provide documentation of the payment of child support. If you need more space, attach a separate page that includes your name and Social Security Number at the top.

<table>
<thead>
<tr>
<th>Name of Person Who Paid Child Support</th>
<th>Name of Person to Whom Child Support was Paid</th>
<th>Name of Child for Whom Support Was Paid</th>
<th>Amount of Child Support Paid in 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marty Jones (example)</td>
<td>Chris Smith</td>
<td>Terry Jones</td>
<td>$6,000.00</td>
</tr>
</tbody>
</table>

D. High School Completion Status

Provide one of the following documents that indicate the student’s high school completion status when the student will begin college in 2014–2015:

- A copy of the student’s high school diploma.
- A copy of the student’s final official high school transcript that shows the date when the diploma was awarded.
- A copy of the student’s General Educational Development (GED) certificate or GED transcript.
- An academic transcript that indicates the student successfully completed at least a two-year program that is acceptable for full credit toward a bachelor’s degree.
- If State law requires a homeschooled student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a copy of that credential.
- If State law does not require a homeschooled student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a transcript or the equivalent, signed by the student's parent or guardian, that lists the secondary school courses the student completed and documents the successful completion of a secondary school education in a homeschool setting.

If the student is unable to obtain the documentation listed above, he or she must contact the financial aid office.
**IMPORTANT**

For students who are able to return this document to their institution in person, Section E must be signed at the institution without exception; it will not be accepted unless it is signed in front of a Financial Aid Official. If you are not able to return this document in person, you may skip Section E but must complete Section F.

E. Identity and Statement of Educational Purpose

The student must appear in person at __________________________________________ to verify his or her identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver’s license, other state-issued ID, or passport. The institution will maintain a copy of the student’s photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the student’s ID. In addition, the student must sign, in the presence of the institutional official, the following:

Statement of Educational Purpose

I certify that I _____________________________ am the individual signing this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending ___________________________________________ for 2014-2015.

(Student’s Signature)        (Date)                 (Student’s ID Number)

Section F must only be completed if the student is unable to return this document to the institution in person.

F. Identity and Statement of Educational Purpose

If the student is unable to appear in person at __________________________________________ to verify his or her identity the student must provide:

(a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver’s license, other state-issued ID, or passport; and

(b) The original notarized Statement of Educational Purpose provided below.
Student’s Name: ___________________________________________  Banner ID: _____________________________________________

Statement of Educational Purpose

I certify that I _____________________________ am the individual signing this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending __________________________________ for 2014-2015.

(Name of Postsecondary Educational Institution)

(Student’s Signature)      (Date)                  (Student’s ID Number)

Notary’s Certificate of Acknowledgement

State of ________________________________________________________________________
City/County of ___________________________________________________________________
On_____________________, before me, ____________________________________________, personally appeared, (Date)     (Notary’s Name)
____________________________________________, and provided to me on basis of satisfactory evidence of identification (Printed Name of Signer)
_______________________________________ to be the above-named person who signed the foregoing instrument.

(Type of government-issued photo ID provided)

WITNESS my hand and official seal (seal)                                            ________________________________________

(Notary signature)

My commission expires on _________________________ (Date)

G. Certification and Signature

I certify that all of the information reported on this worksheet is complete and correct. The student must sign this worksheet. If married, the spouse’s signature is optional.

_________________________________________________  _________________________________
Student’s Signature      Date

_________________________________________________  _________________________________
Spouse’s Signature      Date

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Do not mail this worksheet to the U.S. Department of Education.
Submit this worksheet to the financial aid administrator at your school.
You should make a copy of this worksheet for your records.